[, 4.

12=18-00

Attorney Docket No.

**UNIUS-203** (10025497)

Total Pages

PATENT APPLICATION

Please type a plus sign (+) inside this box +

TRANSMITTAL

Express Mail Label No.

EL 759724025 US

ADDRESS TO:

First Named Inventor or Application Identifier Yoshinori NAKAGAWA and Takahiro IKEJIRI

Assistant Commissioner for Patents

**APPLICATION ELEMENTS** 

(only for new nonprovisional applications under 37 CFR

See MPEP Chapter 600 concerning utility patent application

1. ■ Fee Transmittal Form (attached hereto in duplicate)

2. ■ Specification [Total Pages 17] (Preferred arrangement set forth below)

- Descriptive Title of the Invention
  - Cross References to Related Applications
- Statement Regarding Fed sponsored R&D
- Reference to Microfiche Appendix
- Background of the Invention
- Brief Summary of the Invention
- Brief Description of the Drawings (if filed)
- Detailed Description
- Claim(s)
- Abstract of the Disclosure
- [Total Sheets 3] 3. ■ Drawing(s)(35 USC 113)
- 4. Oath or Declaration
  - a. Newly executed (original or copy)
  - b. Copy from a prior application (37 CFR 1.63(d)) (for continuation/divisional check boxes 5 and 16) i. Deletion of Inventor(s)

Signed statement attached deleting inventor(s) named in the prior application, see 37 CFR 1.63(d)(2) and 1.33(b).

□ Incorporation by Reference 5. (useable if Box 4b is checked)

The entire disclosure of the prior application, from which a copy of the oath or declaration is supplied under Box 4b, is considered as being part of the disclosure of the accompanying application and is hereby incorporated by reference therein.

Washington, DC 20231

**Box Patent Application** 

- 6. ☐ Microfiche Computer Program (Appendix)
- 7. Nucleotide and/or Amino Acid Sequence Submission (if applicable, all necessary)
- a. □Computer Readable Copy
- b. □Paper Copy (identical to computer copy)
- c. ☐ Statement verifying identity of above copies

## **ACCOMPANYING APPLICATION PARTS**

- 8. Assignment Papers (cover sheet & document(s))
- 9. ☐ 37 CFR 3.73(b) Statement

(when there is an asignee) □Power of Attorney

- 10. ☐ English Translation Document (if applicable)
- 11.□ Information Disclosure Statement

(IDS)/PTO-1449 □Copies of IDS Citations

- 12.**■** Preliminary Amendment
- 13.■ Return Receipt Postcard (MPEP 503) (Should be specifically itemized)
- 14. Certified Copy of Priority Document(s) (if foreign priority is claimed) JP2000-215332
- 15. Other: Small entity statement of assignee

6. If a CONTINUING APPLICATION	, check appropriate box and supply the requisite information
CO Managhar Divisions	L □ Continuation in Part (CIP) of prior application No:

☐ Continuation ☐ Divisional ☐ Continuation-in-Part (CIP) of prior application

☐ For this application, please cancel original Claims 17.

of the prior application before calculating the filing fee.

18. CORRESPONDENCE ADDRESS ■ Customer Number or Bar Code Label 24972

or Correspondence Address below

19. TELEPHONE CONTACT

Please direct all telephone calls or telefaxes to James R. Crawford at:

Telephone:

(212) 318-3148

Fax: (212) 318-3400

19. SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT REQUIRED

James R. Crawford

Reg. No. 39,155

**SIGNATURE** 

DATE

NAME

Décember 15, 2000



Complete if Known				
Comp	piete ii Known			
Application Number	Tossigned			
Filing Date	Herewith			
First Named Inventor	Nakagawa et al			
Group Art Unit	To be assigned	0		
Examiner Name	To be assigned	-a_		
Attorney Docket Number	UNIUS-203	0.0		
		-: <u>@</u>		

## **FEE CALCULATION**

## **CLAIMS AS FILED**

(1)	(2)	(3)	(4)	(5)
FOR: Small entity	NUMBER FILED	NUMBER EXTRA	RATE	BASIC FEE \$710.00
TOTAL CLAIMS	10 - 20 =	0	x 9.00	\$ 0.00
INDEPENDENT CLAIMS	1 - 3 =	0	x 82.00	\$ 0.00
MULTIPLE DEPENDENT CLAIMS		N/A	\$270.00	
			TOTAL FEES	\$355.00

## **METHOD OF PAYMENT**

- Please charge Deposit Account No. 50-0624 in the amount of \$355.00
- ☐ A check for \$710.00.00 is enclosed to cover the cost of the Application filing fee.
- The Commissioner is hereby authorized to charge any additional fees which may be required in connection with the filing of this communication, or credit any overpayment, to Account No. 50-0624. A duplicate of this sheet is enclosed.

SUBMITTED B	Y:		Complete (if applicable)
Typed or Printed Name	James R. Crawford		Reg. No. 39,155
Signature	Jam R Cranh	Date: December 15, 2000	Deposit Account No. 50-0624